FF Special Retirement Coverage

Standard Position Description (SPD)# <u>F02.1</u>

Certification of <u>CSRS Secondary-Administrative (FF)</u> coverage approval for the above SPD can be found in the signed OPM general coverage certification letter dated 07/29/91.

Certification of <u>FERS Secondary-Administrative (FF)</u> coverage approval for the above SPD can be found in the signed DOI general coverage certification sheet dated 10/02/91.

Redescription Reestablishment Other Replaced) To Position Standards Act Exempt Nonexempt 10. Position Status Competitive Excepted (Specify in Remarks, SES (Gen.) SES (CR) SES (Gen.) Official Title of Position	npt Executive Per Financial Disc 11. Position Is: Supervisory Managenal		nent and Interests 3—Critical Sensitive		rtification No.
Reestablishment Other Therefore The Labor Standards Act Exempt To Position Status Competitive Excepted (Specify in Remarks, SES (Gen.) SES (Gen.) SES (CR) U.S. Office of Per-	npt Executive Per Financial Disc 11. Position Is: Supervisory Managerial X Neither	topure Employment Financial 12. Sensitivity X 1-Non- Sensitive 2-Nonchical	Interests 3—Cribcal	_ `	
planation (Show any positions replaced) Exempt X Nonexempt	npt Executive Per Financial Disc 11. Position Is: Supervisory Managerial X Neither	topure Employment Financial 12. Sensitivity X 1-Non- Sensitive 2-Nonchical	Interests 3—Cribcal	_ `	
To. Position Status Competitive Excepted (Specify in Remarks, SES (Gen.) SES (CR) SES (Gen.) SES (CR) U.S. Office of Per-	11. Position le: Supervisory Managerial X Neither	12. Sensitivity X 1—Non- Sensitive 2—Noncritical	Interests 3—Cribcal	Vaa	to IA Action
To Position Status X Competitive	Supervisory Managenal Neither	1-Non- Sensitive		W	No
Excepted (Specify in Remarks SES (Gen.) SES (CR) Classified/Graded by Official Title of Position U.S. Office of Per-	ks) Managerial X Neither	2-Noncritical		13. Compe	kitive Level Code
Excepted (Specify in Remarks SES (Gen.) SES (CR) Classified/Graded by Official Title of Position U.S. Office of Per-) X Neither	2-Noncritical	3 00	1	
SES (Gen.) SES (CR) 5. Classified/Graded by Official Title of Position U.S. Office of Per-) X Neither			14. Agenc	y Use
5. Classified/Graded by Official Title of Position U.S. Office of Per-			4—Special Sensitive		
U.S. Office of Per-	7 27 1 1211	Occupational Coc		Initials	Date
	ļ	T Cocopelional Coc	30 0.000		
Department, Agency or Establishment					
Second Level Review Range/Forestry Technician*	GS	455/462	05	M	11/21/90
First Level Review					
Recommended by		_			
Supervisor or Initiating Office Range/Forestry Technician*	GS	455/462	05	mlh	05-25-90
8. Organizational Title of Position (if different from official title)	17. Name of E	imployee (if vacant, sp	pecify)		
Initial Attack Fire/Aviation Dispatcher	•				
	hird Subdivision	·	<u></u>		
	ourth Subdivision	 			· · · · · · · · · · · · · · · · · · ·
	The C. bellining				
o. Second Subdivision	Fifth Subdivision				
the major duties and responsibilities of this position and its organizational	to appointment a	his information is to	blic funds. a	end that fa	ulse or misleadir
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor	knowledge that to to appointment a statements may o ulations. Typed Name and Title	his information is to and payment of pu- constitute violations of of Higher-Level Supe	blic funds, a of such statu evisor or Mana	and that fa tes or their ager (options	alse or misleadii implementing re
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor	knowledge that to to appointment a statements may o ulations. Typed Name and Title	his information is to and payment of pu- constitute violations of	blic funds, a of such statu evisor or Mana	and that fa tes or their ager (options	alse or misleadii implementing re
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the a. Typed Name and Title of Immediate Supervisor	knowledge that to to appointment a statements may o ulations. Typed Name and Title	his information is to and payment of pu- constitute violations of of Higher-Level Supe	blic funds, a of such statu evisor or Mana	and that fa tes or their ager (options	alse or misleadii implementing re
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Signature Date Da	knowledge that to appointment a statements may or ulations. Typed Name and Title L. a. BARK	his information is to and payment of pu- constitute violations of of Higher-Level Supe	blic funds, a of such status rvisor or Mans	and that fa tes or their ager (options	alse or misleadii implementing re
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Signature Date Signature Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards. Typed Name and Title of Official Taking Action	knowledge that to appointment a statements may or ulations. Typed Name and Title L. a. BARK	his information is to and payment of puronstitute violations of Higher-Level Super OW Ch Fi L + BARK(blic funds, a of such status rvisor or Mans re & A	and that fates or their	In Date JAN 8
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the a. Typed Name and Title of Immediate Supervisor Date Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, it no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Talong Action JULIET D. POWELL	knowledge that it to appointment to appointment statements may culations. Typed Name and Title L's BARK(Insture (SIBNed) Position Classification GS-455/46	his information is to and payment of purpositive violations of Higher-Level Super DW Ch Fi L , BARK(on Standards Used in (of such status rvisor or Mans re & A OW Classifying/Gra ards, and inf	end that fates or their viatio	implementing remails In Toate JAN 8
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Interest of Inter	knowledge that it to appointment a statements may or ulations. Typed Name and Title L'e BARK (SIBNED) Position Classification GS-455/46	his information is to ind payment of puronstitute violations of Higher-Level Super OW Ch Fi L, BARK(n Standards Used in 0	blic funds, a of such status resor or Mans re & A D W Classifying/Gra lards, and infinassification of	eger (options Viatio	Date JAN 8 on their application may be review
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the a. Typed Name and Title of Immediate Supervisor To Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5. U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Internal Personnel Management Specialist	knowledge that to appointment a statements may or ulations. Typed Name and Title Lea BARK (SIBNE d) Position Classification GS-455/46 Information for Empre available in the part and corrected by the	his information is to and payment of purchase of Higher-Level Super OW Ch Fi L + BARK(n Standards Used in (2 ployees. The standards or sonnel office. The capanetry or the U.S.	blic funds, a of such status reisor or Mans re & A W Classifying/Gra ards, and infelessification of S. Office of P	end that fates or their viatio viatio ading Positio formation coof the positio	on their application may be review
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the a. Typed Name and Title of Immediate Supervisor Date Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Date Date	knowledge that to appointment a statements may or ulations. Typed Name and Title Lea BARK (SIBNED) Position Classification GS-455/46 Information for Emire available in the pand corrected by the mation on classification and corrected by the mation on classification on classification and corrected by the mation of classification and corrected by the mation and corrected by the mation of classification and corrected by the corrected	his information is to and payment of purpositive violations of Higher-Level Super OW Ch Fi L + BARK(n Standards Used in (2 ployees. The standards on the U.S. is agency or aging apriced to the U.S. is agency or aging apriced to the U.S. is agency or the U.S. is	rvisor or Mans re & A O W Classifying/Gra ards, and inficacylification (F) peals, and c	reger (options Viatio ading Positio	inplementing remails In Date JAN 8 S On their application on may be reviewed in exemption from exemption exemption exemption exemption from exemption exem
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Impediate Supervisor 1. Typed Name and Title of Immediate Supervisor 1. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. 1. Typed Name and Title of Official Taking Action 1. JULIET D. POWELL 1. Personnel Management Specialist 1. Interest Date 1. Date	knowledge that it to appointment a statements may be ulations. Typed Name and Title L'e BARK (Insture (SISNE d) Position Classification GS-455/46 Information for Emerical accordance of the particular of classification of the particular of t	his information is to and payment of purpositive violations of Higher-Level Super OW Ch Fi L + BARK(n Standards Used in (2 ployees. The standards on the U.S. is agency or aging apriced to the U.S. is agency or aging apriced to the U.S. is agency or the U.S. is	rvisor or Mans re & A O W Classifying/Gra ards, and inficacylification (F) peals, and c	reger (options Viatio ading Positio	inplementing remails In Date JAN 8 S On their application on may be reviewed in exemption from exemption exemption exemption exemption from exemption exem
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5. U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Interpolation Date Date Date Date Date Date Date Date Date	knowledge that to appointment a statements may or ulations. Typed Name and Title Lea BARK (SIBNED) Position Classification GS-455/46 Information for Emire available in the pand corrected by the mation on classification and corrected by the mation on classification on classification and corrected by the mation of classification and corrected by the mation and corrected by the mation of classification and corrected by the corrected	his information is to and payment of purpositive violations of Higher-Level Super OW Ch Fi L + BARK(n Standards Used in (2 ployees. The standards on the U.S. is agency or aging apriced to the U.S. is agency or aging apriced to the U.S. is agency or the U.S. is	rvisor or Mans re & A O W Classifying/Gra ards, and inficacylification (F) peals, and c	reger (options Viatio ading Positio	Date Date Date An I 8 9 9 9 9 9 9 9 9 9
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. LILIET D. POWELL Personnel Management Specialist Integrature Date	knowledge that it to appointment a statements may or ulations. Typed Name and Title Lea BARK (SIBNED) Position Classification GS-455/46 Information for Emerica available in the part of the par	his information is to and payment of puronstitute violations of Higher-Level Super OW Ch Fi L, BARK(n Standards Used in 0 2 ployees. The standersonnel office. The care agency or the U.S. tion/job grading approach in the personnel office.	blic funds, a of such statular visor or Mans F. E. & A D. W Classifying/Grant classification of S. Office or to peals, and cell office or to the office or the o	end that fates or their leger (options Viatio ading Positio formation of the positio fersonnel formplaints the U.S. C	Date Date Date An I 8 9 9 9 9 9 9 9 9 9
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Year Name and Title of Official Talong Action JULIET D. POWELL Personnel Management Specialist Interpolation Power Initials Date Initials Date Initials Date Initials Date Initials Date Initials Date Initials	knowledge that it to appointment a statements may or ulations. Typed Name and Title Lea BARK (SIBNED) Position Classification GS-455/46 Information for Emerica available in the part of the par	his information is to and payment of puronstitute violations of Higher-Level Super OW Ch Fi L, BARK(n Standards Used in 0 2 ployees. The standersonnel office. The care agency or the U.S. tion/job grading approach in the personnel office.	blic funds, a of such statular visor or Mans F. E. & A D. W Classifying/Grant classification of S. Office or to peals, and cell office or to the office or the o	end that fates or their leger (options Viatio ading Positio formation of the positio fersonnel formplaints the U.S. C	Date Date Date An I 8 9 9 9 9 9 9 9 9 9
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Signal Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Interpolation Review Initials Date Initials Date Initials Date In Employee (optional) Department of Title Initials Department Initials Department Initials Department Initials Department Init	knowledge that it to appointment a statements may or ulations. Typed Name and Title L's BARK (Instruments of the statements of the statement of the stat	inis information is to and payment of purpositive violations of Higher-Level Super OW Ch Fi L + BARK(In Standards Used in (In 22 In playees. The standards or sonnel office. The case agency or the U.S. tion/job grading appropriate personnel office in personnel office. In the personnel office is agency or the U.S. tion/job grading appropriate personnel office.	blic funds, a of such status rvisor or Mans re & A W Classifying/Gra ards, and inficacion of the control of	rind that falses or their leger (options Viatio ading Positio formation contraction on the position on the position of the position of the position of the position of the U.S. C.	on their application on axemption from their application on their application on their application on exemption from the province of Person is Date
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the a Typed Name and Title of Immediate Supervisor 1. Typed Name and Title of Immediate Supervisor 2. Signature 2. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5. U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Interpolation Review Initials Date Initials Date Initials Date Initials Department of Interpolation Classifier This PD has been in The published standard of the	knowledge that to appointment a statements may or ulations. Typed Name and Title Lea BARK (SIBNED) Position Classification GS-455/46 Information for Emerica available in the pand corrected by the nation on classification and corrected by the nation on classification and corrected by the nation on classification on classification and corrected by the nation on classification on classification and corrected by the nation on classification on classification and corrected by the nation of classification of classification and corrected by the nation of classification	playees. The standersonnel of the personnel of the person	blic funds, a of such status rvisor or Mans re & A W Classifying/Gra ards, and inficacion of the control of	rind that falses or their leger (options Viatio ading Positio formation contraction on the position on the position of the position of the position of the position of the U.S. C.	on their application on axemption from their application on their application on their application on exemption from the province of Person is Date
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the Typed Name and Title of Immediate Supervisor Date Signature Date Signature Date Signature Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Signature Date Interest Date Interest Date Interest Date Classifier Classifier This PD has been T	knowledge that to appointment a statements may or ulations. Typed Name and Title L. a. BARK SIBNED Position Classification GS-455/46 Information for Emere available in the part of corrected by the nation on classification of classification	playees. The standers of the property of the p	blic funds, a of such status rvisor or Mans F. & A D. W Classifying/Grant classification of the coll office or the coll offi	ormation coof the position of	on their application may be review danagement. Into on exemption from the property of the prop
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the a Typed Name and Title of Immediate Supervisor College In Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5. U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Compared to Official Taking Action JULIET D. POWELL Personnel Management Specialist Compared to Official Taking Action JULIET D. POWELL Personnel Management Specialist Compared to Official Taking Action Signature Date Interest Date Compared to Interest Date Compared to Interest Department of Interest Date Compared to Date Date Com	knowledge that it to appointment a statements may or ulations. Typed Name and Title L's BARK (Signed) Position Classification GS-455/46 Information for Emarca available in the pand corrected by the nation on classification on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation of the na	playees. The standersonnel office The design of the personnel office the design of the design	blic funds, a of such status rvisor or Mans F. E. & A D. W Classifying/Grant classification of peals, and cell office or to the peals and cell office or to	ormation of the position of th	on their application may be review danagement. Into on exemption from the property of the prop
Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the standards and Title of Immediate Supervisor C. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5. U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards. Typed Name and Title of Official Taking Action JULIET D. POWELL Personnel Management Specialist Signature Date Date Interview Interview Interview Interview C. Classifier C. Classifier This PD has been primary and the primary an	knowledge that it to appointment a statements may or ulations. Typed Name and Title L's BARK (Signed) Position Classification GS-455/46 Information for Emarca available in the pand corrected by the nation on classification on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation on classification in the pand corrected by the nation of the na	playees. The standersonnel office The design of the personnel office the design of the design	blic funds, a of such status rvisor or Mans F. & A D. W Classifying/Grant classification of Soffice of Peals, and cell office or to the control of the control of the cell office or the cell of	ormation of the position of th	on their application may be review danagement. Into on exemption from the property of the prop

Range/Forestry Technician, GS-455/462-5 Initial Attack Fire/Aviation Dispatcher Position No. F021

INTRODUCTION

This position is located in an initial attack fire suppression organization where the employee performs a variety of staff and administrative duties relating to fire suppression activities and the support of fire management programs.

The primary purpose of this position is to serve as a dispatcher in support of an initial attack suppression program. As time permits, the employee may be assigned to support other resource programs in a dispatch capacity. It has been determined that the employee must have prior line fire fighting experience and training in order to anticipate needs, determine priorities, and select alternative resources.

DUTIES

Receives fire reports, determines location, land status, and current fire information, and dispatches personnel, equipment, aircraft, and/or supplies according to pre-defined plans or in response to resource orders from the field. Based upon prior fire fighting experience and training, anticipates needs based upon the status of fire suppression activities and makes recommendations regarding orders/anticipated orders.

Completes resource orders, maintains fire resource tracking systems, inputs and retrieves fire weather data, operates fire telecommunications and radio systems, and processes and collates fire information from the field.

Completes daily, weekly, monthly, and year-end required records, reports, and summaries using established procedures.

Provides information and coordinates with local law enforcement, other agency, and media personnel on both fire and non-fire emergency situations.

May be temporarily assigned as the lead/supervisory dispatcher and be responsible for monitoring the operation of the dispatch office for short periods of time.

FACTORS

Factor 1, Knowledge Required by the Position

Knowledge of fire suppression tactics, methods and procedures, and safety precautions sufficient to gather facts and determine which predetermined dispatch guideline to use in response to wildland fire reports received from a variety of resource users, recreationists, or Bureau employees unfamiliar with wildfire reporting procedures and characteristics. Prior firefighting experience is required.

Knowledge of standard dispatch procedures and guidelines used in the dispatch of personnel, equipment and supplies for wildfire/prescribed burn occurrences within a wildland fire organization sufficient to select a dispatch guide for a specific initial attack action.

Knowledge of computer program operations and output information available within the fire suppression organization sufficient to use that information in recommending the dispatch of additional personnel, equipment and supplies to wildfires/prescribed fires in situations where initial attack efforts do not result in the immediate extinguishment of the fire.

Ability to read maps, pinpoint locations from various sources of information, and determine the most feasible access route to a given location.

Ability to communicate effectively with others in emergency situations using standard radio and telecommunications systems and specialized fire terminology is required.

Ability to learn and work with specialized fire computer programs and planning systems is required.

Factor 2, Supervisory Controls

The supervisor or work leader makes assignments indicating what is to be done, priorities, limitations, quality and quantity expected, and deadlines. Generally, assignments of a non-recurrent nature are explained at the time work is assigned. The employee uses initiative in carrying out recurring assignments independently and determining how to make the best utilization of the fire resources available. A leader/supervisor is generally available to provide assistance in situations where new or unusual circumstances are encountered. Work is spot checked for adherence to established procedures as well as for providing services in a timely manner.

Factor 3, Guidelines

Guidelines are available in the form of BLM and Departmental Manuals for fire and aviation operations, unit fire mobilization guides, unit dispatch and aircraft operational plans, fire management activity plans, interagency fire business management handbook, unit/Bureau/Departmental/Office of Aircraft Services and Federal Aviation Agency aviation guidelines and procedures, and cooperative agreements and operating plans with local, county, state, and Federal fire suppression agencies.

Procedures for performing the fire fighting duties are established, provided in training sessions, and, for the most part, available in printed materials. The employee's alternatives in taking action are normally limited to well established procedures or recommending alternatives. The supervisor/work leader is readily available in most instances to assist if a more difficult situation is encountered.

Factor 4, Complexity

Routine office operations involve collection, submission, and dissemination of records, reports, and computer data information; locating sources and dispatching prearranged personnel, equipment and supplies; and tracking and coordinating resources. Emergency operations often require the dispatching of a volume of resources from a variety of sources utilizing a variety of different guidelines. Some judgment is required in interpreting orders to ensure that all required items are available at field locations for the crews. Many of the orders must be double-checked and evaluated before employees can continue in the process or make resource selections.

Factor 5. Scope and Effect

The purpose of the position is to dispatch personnel, equipment, and supplies for the suppression of range and forest wild fires.

The work performed by the dispatcher contributes to the effectiveness of the fire fighting efforts of suppression crews in controlling wild fires in a safe and efficient manner and in protecting resource values.

Factor 6, Personal Contacts

Personal contacts are with other employees in the fire suppression organization, other agency dispatchers, and suppliers of fire fighting equipment and supplies.

Factor 7, Purpose of Contacts

The purpose of the contacts is to receive orders, coordinate work efforts, clarify assignments, and provide information on the status of orders.

Factor 8, Physical Demands

The work requires working for long hours under emergency situations. During periods of heavy fire activity, shifts of 12 hours per day for seven or more consecutive days may occur.

If applicable, the employee must be able to meet the established step test and arduous physical requirements for carrying out dispatch duties at fire camps.

Factor 9, Work Environment

Most work is performed in an office setting, but is occasionally assigned to fire camps which may lack modern sanitary facilities and include exposure to smoke conditions.